# State of Alaska FY2021 Governor's Operating Budget

Department of Health and Social Services
Public Health
Results Delivery Unit Budget Summary

#### **Public Health Results Delivery Unit**

#### **Contribution to Department's Mission**

To protect and promote the health of Alaskans.

#### Results

(Additional performance information is available on the web at https://omb.alaska.gov/results.)

#### **Core Services**

- Diagnose and investigate health problems and health hazards in the community.
- Inform, educate and empower people about health issues.
- Mobilize partnerships and action to identify and solve health problems.
- Develop policies and plans that support individual and community health efforts.
- Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- Assure adequate and competent public health infrastructure and enforcement of health and safety laws/regulations.
- Monitor, research and evaluate health status and service effectiveness, accessibility and quality to identify and solve community health problems.

#### **Measures by Core Service**

(Additional performance information is available on the web at https://omb.alaska.gov/results.)

- 1. Diagnose and investigate health problems and health hazards in the community.
- 2. Inform, educate and empower people about health issues.
- 3. Mobilize partnerships and action to identify and solve health problems.
- 4. Develop policies and plans that support individual and community health efforts.
- 5. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
- 6. Assure adequate and competent public health infrastructure and enforcement of health and safety laws/regulations.
- 7. Monitor, research and evaluate health status and service effectiveness, accessibility and quality to identify and solve community health problems.

#### Major RDU Accomplishments in 2019

- In 2018, 29.5 percent of Alaska adults were obese, down from 34.2 percent in 2017. In 2017, 10 percent of Alaska youth smoked, down from 37 percent in 1995.
- In 2017, 80 percent of all Alaska adults reported that they are not current smokers, a significant improvement over 76 percent in 2008.
- The cancer mortality rate fell to 136.2 per 100,000 for Alaskans, meeting and exceeding the Healthy Alaskans 2020 target of 162.0. Cancer is the leading cause of death for Alaskans.
- Alaska went from 49th in the U.S. to 2nd for newborn bloodspot screening specimen collection-to-result times
  after regulations decreased the number of required screens per newborn from two to one that results in quicker
  diagnosis and treatment for newborns. Alaska's model has been recognized nationally.
- Successfully isolated a confirmed single measles case so that it did not turn into a public health issue.
- Activated Department of Health and Social Services emergency operations center immediately to provide critical information via statewide teleconferences within 3 hours, coordinated health and medical resource requests and supported the ongoing health of Alaskans following the 7.1 earthquake.

- Developed and released the Voluntary Non-Opioid Directive which empowers patients to proactively inform their provider that they do not want to receive opioids.
- Implementation of the comprehensive Marijuana Use Prevention, Education, and Treatment Program to better understand the public health and safety impacts of marijuana legalization, as well as fund afterschool programming which serves as a protective factor to prevent marijuana use by youth.
- Passed legislation includes reauthorizing the Alaska Vaccine Assessment Program, which provides vaccine to 50
  percent of Alaskans, and the Supporting Healthcare Access through Loan Repayment Program (SHARP)
  healthcare professional incentive program, which recruits and retains providers in underserved areas. Both of
  these programs are successful public-private partnerships funded entirely by the participants and require no state
  general funds.
- Based on recommendations from the Alaska Opioid Policy Task Force, the Statewide Opioid Action Plan was developed with broad input from multiple agencies and community partners, feedback from meetings and community cafés in more than a dozen Alaska communities concluding with a community summit with nearly 100 Alaskans from more than 80 stakeholders to provide final input for the action plan.

#### **Key RDU Challenges**

- The work to protect the public health of Alaskans involves geographic, cultural, lifestyle, fiscal, and other factors. Improving population health requires an investment in upstream factors that address the conditions in places where Alaskans live, learn, work, and play. Public health approaches require long term solutions to make generational gains. These interventions focus on changing the context to make healthy choices easier and require a widespread, long-term, competent, and collaborative commitment from a wide array of key local stakeholders.
- The ability to identify, assess, and evaluate emerging public health issues hinges on information and the ability to share that information appropriately internally and externally. Information Technology is an increasingly important tool in public health and keeping pace with data systems, specialized equipment, and associated policies is critical to achieving the mission.
- Public Health must provide leadership as necessary to ensure a qualified and available public health workforce.
   Although health care jobs are the fastest growing occupational sector of this decade, the division and partners statewide are challenged to attract and retain highly skilled professionals. At the division, this especially affects scientists and highly skilled professionals in the public health labs, public health nursing, and epidemiology, leaving critical positions vacant and reducing the capacity to positively affect public health.

#### Significant Changes in Results to be Delivered in FY2021

- In 2019, the Alaska Perinatal Quality Collaborative was established as a public-private partnership with birthing facilities, professional organizations, physicians and nurses for collective quality improvement and shared learning of best practices and innovations to improve outcomes for maternal and infant health in Alaska.
- Implementing a public health nursing and primary care integration model. Public Health Nursing will be partnering
  with Alaska Primary Care Association members on community health assessment and community health
  improvement plans and addressing social determinates of health.

#### **Contact Information**

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## Public Health RDU Financial Summary by Component

All dollars shown in thousands

	FY2019 Actuals				FY2020 Management Plan				FY2021 Governor			
	UGF+DGF	Other	Federal	Total	UGF+DGF	Other	Federal	Total	UGF+DGF	Other	Federal	Total
	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds	Funds
<u>Formula</u>												
Expenditures												
None.												
Non-Formula												
Expenditures												
Nursing	21,711.9	66.1	4,621.2	26,399.2	22,119.5	535.2	5,292.9	27,947.6	21,936.4	535.2	5,339.8	27,811.4
Women, Children	3,729.0	1,146.5	7,209.0	12,084.5	4,260.7	829.4	9,172.9	14,263.0	4,747.0	835.2	9,206.3	14,788.5
and Family Healt	0.054.0	0.440.4	4.070.0	5 074 0	4 0 4 0 7	0.000.0	0.004.0	0.044.0	4 000 5	0.000.0	0.000.0	0 000 7
Public Health Admin Svcs	2,254.6	2,146.4	1,270.6	5,671.6	4,313.7	2,296.6	3,201.3	9,811.6	4,323.5	2,300.3	3,209.9	9,833.7
Emergency	2,824.2	247.0	6,381.2	9,452.4	2,917.7	1,233.4	7,821.3	11,972.4	5,560.1	2,580.2	8,241.2	16,381.5
Programs	2,024.2	247.0	0,501.2	3,432.4	2,317.7	1,200.4	7,021.0	11,572.4	3,300.1	2,000.2	0,241.2	10,501.5
Chronic Disease	7,673.9	503.1	5,454.7	13,631.7	10,002.4	582.1	6,487.9	17,072.4	10,021.1	584.0	6,505.4	17,110.5
Prev/Hlth Promo							•					
Epidemiology	10,546.5	908.5	11,644.8	23,099.8	2,043.2	2,069.1	12,089.2	16,201.5	2,053.5	2,071.0	12,153.3	16,277.8
Bureau of Vital Statistics	2,867.8	109.5	1,370.6	4,347.9	3,653.1	529.5	1,273.4	5,456.0	3,676.9	530.4	1,280.6	5,487.9
Emergency	2,573.1	0.0	401.9	2,975.0	2,632.4	0.0	401.3	3,033.7	0.0	0.0	0.0	0.0
Medical Svcs					·							
Grants												
State Medical Examiner	3,135.4	118.3	0.0	3,253.7	3,201.9	75.0	10.0	3,286.9	3,220.7	75.0	10.0	3,305.7
Public Health	4,212.4	1,070.0	2,279.2	7,561.6	5,079.3	809.9	1,815.6	7,704.8	5,110.5	813.3	1,828.9	7,752.7
Laboratories	7,212.4	1,070.0	2,219.2	7,301.0	5,079.5	009.9	1,013.0	1,104.0	5,110.5	013.3	1,020.9	1,132.1
Totals	61,528.8	6,315.4	40,633.2	108,477.4	60,223.9	8,960.2	47,565.8	116,749.9	60,649.7	10,324.6	47,775.4	118,749.7

### **Public Health** Summary of RDU Budget Changes by Component From FY2020 Management Plan to FY2021 Governor

				All dollars shown in thousands			
	<u>Unrestricted</u>	<b>Designated</b>	Other Funds	<u>Federal</u>	<u>Total Funds</u>		
	<u>Gen (UGF)</u>	Gen (DGF)		<u>Funds</u>			
FY2020 Management Plan	42,231.0	17,992.9	8,960.2	47,565.8	116,749.9		
One-time items:							
-Nursing	-379.0	0.0	0.0	0.0	-379.0		
-Emergency Programs	0.0	0.0	-200.0	0.0	-200.0		
-Bureau of Vital Statistics	0.0	0.0	-200.0 -40.0	0.0	-40.0		
-bureau or vital Statistics	0.0	0.0	-40.0	0.0	-40.0		
Adjustments which							
continue current level of							
service:							
-Nursing	195.9	0.0	0.0	46.9	242.8		
-Women, Children and	481.5	4.8	5.8	33.4	525.5		
Family Healt							
-Public Health Admin Svcs	9.7	0.1	3.7	8.6	22.1		
-Emergency Programs	2,642.4	0.0	276.0	419.9	3,338.3		
-Chronic Disease Prev/Hlth	14.6	4.1	1.9	17.5	38.1		
Promo					•		
-Epidemiology	10.3	0.0	1.9	64.1	76.3		
-Bureau of Vital Statistics	0.0	23.8	40.9	7.2	71.9		
-Emergency Medical Svcs	-2,632.4	0.0	0.0	-401.3	-3,033.7		
Grants	2,002.4	0.0	0.0	401.0	0,000.7		
-State Medical Examiner	18.8	0.0	0.0	0.0	18.8		
-Public Health Laboratories	31.1	0.1	3.4	13.3	47.9		
Proposed budget							
increases:							
	0.0	0.0	1,270.8	0.0	1,270.8		
-Emergency Programs	0.0	0.0	1,270.0	0.0	1,210.0		
FY2021 Governor	42,623.9	18,025.8	10,324.6	47,775.4	118,749.7		